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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	art 1: Identify Yourself					
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):		
1.	Your full name					
your gover picture ide example, y	Write the name that is on your government-issued	Wilfredo First name		Eva First name		
	picture identification (for example, your driver's license or passport).	Middle name		Middle name		
	Bring your picture	Cruz		Cruz		
	identification to your meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)		Last name and Suffix (Sr., Jr., II, III)		
2.	All other names you have used in the last 8 years	Wilfredo Cruz-Gonzales				
	Include your married or maiden names.					
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-3785		xxx-xx-7332		

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Debtor 1 Wilfredo Cruz
Debtor 2 Eva Cruz

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names		I have not used any business name or EINs. Business name(s) EINs	■ I have not used any business name or EINs. Business name(s) EINs			
5.	Where you live	210 E. Spring Street	If Debtor 2 lives at a different address:			
		Yorkville, IL 60560 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Kendall				
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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	otor 1 otor 2	Wilfredo Cruz Eva Cruz			Docui		Case number (if known)	
Par	t 2:	Tell the Court About \	Your Bankı	ruptcy C	ase			
7.	The	chapter of the cruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy					
	choo	choosing to file under	■ Chapt	er 7				
			☐ Chapt					
			☐ Chapt	er 12				
			☐ Chapt	er 13				
8.	How	you will pay the fee	abo	out how your er. If your	ou may pay. Typ	ically, if you are paying the fee yo	with the clerk's office in your local court for more de urself, you may pay with cash, cashier's check, or mo lf, your attorney may pay with a credit card or check	oney
			☐ I ne	ed to pa	y the fee in inst	allments. If you choose this options (Official Form 103A).	n, sign and attach the Application for Individuals to F	^a y
			☐ I re but app	quest that is not red blies to yo	at my fee be wa quired to, waive your family size an	ived (You may request this option your fee, and may do so only if yo d you are unable to pay the fee in	only if you are filing for Chapter 7. By law, a judge nur income is less than 150% of the official poverty lininstallments). If you choose this option, you must fill lal Form 103B) and file it with your petition.	e that
9.	Have you filed for	■ No.						
9.		bankruptcy within the last 8 years?	□ Yes.					
	iuoi	, you. o .	□ 163.	District		When	Case number	
				District		When	Case number	
				District		When	Case number	
10.		any bankruptcy	■ No					
	filed not fi you,	s pending or being by a spouse who is iling this case with or by a business her, or by an ate?	☐ Yes.					
				Debtor			Relationship to you	
				District		When	Case number, if known	
				Debtor			Relationship to you	
				District		When	Case number, if known	
11.		ou rent your lence?	■ No.	Go to	line 12.			
	16210	ende f	☐ Yes.	Has yo	our landlord obta	ined an eviction judgment agains	you and do you want to stay in your residence?	
					No. Go to line	12.		
					Yes. Fill out Initial bankruptcy pet		ludgment Against You (Form 101A) and file it with thi	is

Case 16-36119 Doc 1 Filed 11/12/16 Entered 11/12/16 12:00:55 Desc Main Debtor 1 Wilfredo Cruz

Deb	otor 2 Eva Cruz				Case number (if known)			
Par	t 3: Report About Any Bu	ısinesses	You Owr	ı as a Sole Proprie	tor			
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	No. Go to Part 4.					
		☐ Yes.	Yes. Name and location of business					
	A sole proprietorship is a							
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name					
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	oer, Street, City, Stat	te & ZIP Code			
	it to this petition.		Chec	Check the appropriate box to describe your business:				
				Health Care Busir	ness (as defined in 11 U.S.C. § 101(27A))			
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))			
				Stockbroker (as d	lefined in 11 U.S.C. § 101(53A))			
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))			
				None of the above	e			
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline operation	s. If you ir	ndicate that you are low statement, and f	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of federal income tax return or if any of these documents do not exist, follow the procedure			
	For a definition of small	■ No.	I am r	I am not filing under Chapter 11.				
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am f Code		11, but I am NOT a small business debtor according to the definition in the Bankruptcy			
		☐ Yes.	I am f	iling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.			
Par	t 4: Report if You Own or	· Have Any	/ Hazardo	ous Property or An	y Property That Needs Immediate Attention			
14.	Do you own or have any property that poses or is	■ No.						
	alleged to pose a threat	☐ Yes.						
	of imminent and identifiable hazard to		What is	the hazard?				
	public health or safety? Or do you own any property that needs immediate attention?			diate attention is why is it needed?				
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?				
					Number, Street, City, State & Zip Code			

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Debtor 1 Wilfredo Cruz
Debtor 2 Eva Cruz
Case number (if known)

Tell the court whether you have received a briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

Explain Your Efforts to Receive a Briefing About Credit Counseling

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 16-36119 Doc 1 Filed 11/12/16 Entered 11/12/16 12:00:55 Desc Main Document Page 6 of 54

	tor 1 tor 2	Wilfredo Cruz Eva Cruz		Document	r age o o	_	mber (if known)			
Part	6:	Answer These Questi	ons for Ren	orting Purposes						
	Wha	t kind of debts do	16a. <i>I</i>	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." □ No. Go to line 16b. ■ Yes. Go to line 17.						
			[
				Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.						
			[☐ No. Go to line 16c.						
				Yes. Go to line 17.						
			16c. S	State the type of debts you owe th	at are not consur	mer debts or busi	iness debts			
17.		ou filing under oter 7?	□ No. I	am not filing under Chapter 7. Go	to line 18.					
	after prop	ou estimate that any exempt erty is excluded and		I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?						
		administrative expenses are paid that funds will be available for distribution to unsecured creditors?		■ No						
	be a		[☑ Yes						
18.		many Creditors do	1 -49		1 ,000-5,000		25,001-50,000			
		you estimate that you owe?	□ 50-99		□ 5001-10,000 □ 10,001-25,000		☐ 50,001-100,000			
			□ 100-199 □ 10,001-28			00	☐ More than100,000			
		How much do you estimate your assets to	\$0 - \$50	,	<u></u> \$1,000,001		□ \$500,000,001 - \$1 billion			
		orth?		- \$100,000 1 - \$500,000	□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million		□ \$1,000,000,001 - \$10 billi □ \$10,000,000,001 - \$50 bil			
				1 - \$1 million		01 - \$500 million	☐ More than \$50 billion			
20.		much do you nate your liabilities	\$0 - \$50		□ \$1,000,001		□ \$500,000,001 - \$1 billion			
	to be		_	1 - \$100,000 1 - \$500,000	□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million		□ \$1,000,000,001 - \$10 bill □ \$10,000,000,001 - \$50 bi			
			□ \$500,001 - \$1 million		\$100,000,00	01 - \$500 million	☐ More than \$50 billion			
Part	7:	Sign Below								
For	you		I have exar	nined this petition, and I declare u	under penalty of p	perjury that the in	formation provided is true and correct.			
			If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.							
			If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).							
			I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.							
							ey or property by fraud in connection w 20 years, or both. 18 U.S.C. §§ 152, 13			
			/s/ Wilfred			/s/ Eva Cruz				
			Wilfredo Signature o			Eva Cruz Signature of De	ebtor 2			
			Executed o	November 12, 2016 MM / DD / YYYY			November 12, 2016 MM / DD / YYYY			

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Debtor 1 Debtor 2	Wilfredo Cruz Eva Cruz	Document	number (if known)		
represent	attorney, if you are ed by one	I, the attorney for the debtor(s) named in this under Chapter 7, 11, 12, or 13 of title 11, Unite for which the person is eligible. I also certify the control of the contr	ed States Code, and have ex that I have delivered to the de	splained the relief available ebtor(s) the notice required	under each chapter by 11 U.S.C. § 342(b)
•	not represented by ey, you do not need a page.	and, in a case in which § 707(b)(4)(D) applies schedules filed with the petition is incorrect.	, certify that I have no knowl	edge after an inquiry that th	e information in the
		/s/ Michael W. Huseman Signature of Attorney for Debtor	Date	November 12, 2016 MM / DD / YYYY	

Email address

Michael W. Huseman

1999 West Downer Place

Contact phone **630-897-8764**

Aurora, IL 60506 Number, Street, City, State & ZIP Code

Dreyer, Foote, Streit, Furgason & Slocum, P.A.

Printed name

06280259Bar number & State

mhuseman@dreyerfoote.com

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		170.000		
Fill in this informa	ation to identify your	case:		
Debtor 1	Wilfredo Cruz			
	First Name	Middle Name	Last Name	
Debtor 2	Eva Cruz			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

2/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your a	assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	160,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	24,953.75
	1c. Copy line 63, Total of all property on Schedule A/B	\$	184,953.75
Par	t2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	242,769.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	31,634.00
	Your total liabilities	\$	274,403.00
Par	t3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	6,248.94
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	6,170.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sc	hedules.
	■ Yes		

the court with your other schedules.

Official Form 106Sum

Summary of You

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

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Debtor 1	Wilfredo Cruz	Documer	IL F	Page 9 01 54	
Debtor 2	Eva Cruz			Case number (if know	vn)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

7,355.51

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total clair	n
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	8,100.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	8,100.00

	Ca	se 16-36119	Doc 1		11/12/16 ument	Entered 11/12/1	6 12:00:55	Des	sc Ma	ain
Fill	in this inforn	nation to identify	your case and th							
Deb	otor 1	Wilfredo Cruz		e Name		Last Name				
	otor 2 use, if filing)	Eva Cruz First Name	Middle	e Name		Last Name				
Uni	ted States Bar	nkruptcy Court for t	the: NORTHER	RN DISTE	RICT OF ILLIN	IOIS				
Cas	se number _					-			_	heck if this is an mended filing
_		rm 106A/B								
		e A/B: Pr				n asset fits in more than one				12/15
nfor insv Part	mation. If more ver every ques	e space is needed, a tion. Each Residence, Bu	ttach a separate si	heet to th	is form. On the	e are filing together, both are e top of any additional pages on or Have an Interest In				
. D	o you own or h	ave any legal or equ	itable interest in a	any reside	ence, building,	land, or similar property?				
	No. Go to Part	2.								
	Yes. Where is	the property?								
1.1	210 E. Spr	ing Street		What		? Check all that apply				
		f available, or other desc	ription		Single-family h Duplex or mult Condominium		Do not deduct see the amount of any Creditors Who Ha	secured	claims	on Schedule D:
	Yorkville	IL Chair	60560-0000 ZIP Code		Land	or mobile home	Current value of entire property?			nt value of the on you own?
	City	State	ZIF Code		Investment pro Timeshare Other		Describe the nat	ure of yo		*,
				Who I	nas an interest Debtor 1 only	in the property? Check one	a life estate), if k	nown.		
	Kendall				Debtor 2 only					
	County				Debtor 1 and I	Debtor 2 only the debtors and another	Check if this (see instruction		nunity	property
					information yo	ou wish to add about this iter on number:	n, such as local			

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....=>

\$160,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Debte		viiiredo Cruz Eva Cruz			Case number (if known)	
3. C a	rs, vans,	trucks, tractors,	sport utility ve	hicles, motorcycles		
	No					
	Yes					
_	163					
3.1	Make:	Honda		Who has an interest in the property? Check one		ured claims or exemptions. Put
	Model:	Pilot		Debtor 1 only		secured claims on Schedule D: ve Claims Secured by Property.
	Year:	2006		Debtor 2 only		
	Approxir	mate mileage:	80,000	■ Debtor 1 and Debtor 2 only	Current value of t entire property?	the Current value of the portion you own?
	Other int	formation:		☐ At least one of the debtors and another		
		on: 210 E. Sprin lle IL 60560	g Street,	☐ Check if this is community property (see instructions)	\$5,000	\$5,000.00
		DAMA			Do not deduct sec	ured claims or exemptions. Put
3.2	Make:	BMW		Who has an interest in the property? Check one	the amount of any	secured claims on Schedule D:
	Model:	328i		Debtor 1 only	Creditors Who Ha	ve Claims Secured by Property.
	Year:	2008	110000	Debtor 2 only	Current value of t	
		mate mileage: formation:	110000	■ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	entire property?	portion you own?
		on: 210 E. Sprin	a Street.	At least one of the debtors and another		
		lle IL 60560	g ou cou,	☐ Check if this is community property	\$9,000	.00 \$9,000.00
				(see instructions)		
	Yes					
				n for all of your entries from Part 2, including that number here		\$14,000.00
Part 3	Doscri	be Your Personal an	d Household Ite	nme.	!	
				terest in any of the following items?		Current value of the
						portion you own? Do not deduct secured claims or exemptions.
E		goods and furnis Major appliances, f		, china, kitchenware		
	Yes. De	scribe				
		Mis	collangous k	nousehold goods and furnishings		\$1,500.00
		IVIIS	cenaneous i	lousenoid goods and furnishings		φ1,300.00
E	ectronics kamples:	Televisions and rac		eo, stereo, and digital equipment; computers, pr nedia players, games	inters, scanners; music c	ollections; electronic devices
	Yes. De	escribe				
		Mis	cellaneous t	elevisions, cell phones, computer, print	ter, etc.	\$500.00
		<u></u>		, 1, F, F		

8. Collectibles of value

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

■ No

	Document Page 12 of 54	Desc Main
Debtor 1 Debtor 2	Wilfredo Cruz Eva Cruz Case number (if known)	
☐ Yes	. Describe	
Examp No	nent for sports and hobbies les: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes ar musical instruments Describe	nd kayaks; carpentry tools;
■ No	ms pples: Pistols, rifles, shotguns, ammunition, and related equipment Describe	
□ No	es sples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Describe	
	Necessary wearing apparel for debtors and their dependents	\$500.00
□ No	ry ples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, go Describe	ld, silver
	Two wedding bands; engagement ring; miscellaneous jewelry	\$1,000.00
<i>Exan</i> □ No -	arm animals aples: Dogs, cats, birds, horses Describe	
	Two dogs	\$0.00
■ No □ Yes	ther personal and household items you did not already list, including any health aids you did not list Give specific information the dollar value of all of your entries from Part 3, including any entries for pages you have attached art 3. Write that number here	\$3,500.00
	escribe Your Financial Assets wn or have any legal or equitable interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
■ No	aples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition	ח
	sits of money ples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage ho institutions. If you have multiple accounts with the same institution, list each.	ouses, and other similar
■ NO	Institution name:	

Official Form 106A/B Schedule A/B: Property page 3

■ Yes.....

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Deb	otor 2	Eva Cruz			Case number (if known)	
			17.1.	Checking	Old Second National Bank	\$52.10
			17.2.	Checking	JP Morgan Chase Bank	\$100.00
			17.3.	Savings	Earthmover Credit Union	\$25.00
			17.4.	Joint account with Wilfredo's parents	Earthmover Credit Union	\$1.65
_				cly traded stocks ent accounts with brokera	age firms, money market accounts	
	□ Yes			Institution or issuer name	e:	
_	Non-pu joint ve ■ No		tock and	interests in incorporate	ed and unincorporated businesses, including an interest in an LLC, pa	artnership, and
_		Give specific in		about them me of entity:	% of ownership:	
_	Negotia Non-ne	able instruments	include ¡	personal checks, cashiers	le and non-negotiable instruments s' checks, promissory notes, and money orders. r to someone by signing or delivering them.	
_	■ No □ Yes. 0	Give specific info		about them uer name:		
_		nent or pensior les: Interests in			o), thrift savings accounts, or other pension or profit-sharing plans	
ı	Yes. I	_ist each accour		•		
			Туре	of account:	Institution name:	
			IRA		Wheatland Title Retirement Account	\$4,000.00
	Your sh		ed deposi	ts you have made so that	you may continue service or use from a company ic utilities (electric, gas, water), telecommunications companies, or others	
					Institution name or individual:	
			Utilit	у	Com Ed	\$275.00
_	Annuiti ■ No	es (A contract fo	or a perio	dic payment of money to	you, either for life or for a number of years)	
_	⊐ Yes	ls	suer nam	ne and description.		
2	26 U.S.C	s in an educati C. §§ 530(b)(1),			ied ABLE program, or under a qualified state tuition program.	
	■ No □ Yes	lr	stitution i	name and description. Se	eparately file the records of any interests.11 U.S.C. § 521(c):	
	Trusts, ■ _{No}	equitable or fu	ture inte	rests in property (other	than anything listed in line 1), and rights or powers exercisable for yo	our benefit
_	_	Give specific int	formation	about them		

Debtor 1

Entered 11/12/16 12:00:55 Page 14 of 54 Document Wilfredo Cruz Debtor 1 Debtor 2 **Eva Cruz** Case number (if known) 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ■ No ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you □ No Yes. Give specific information about them, including whether you already filed the returns and the tax years...... \$3,000.00 Anticipated tax refund for 2016 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance ☐ No Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: Automobile, homeowners, and health \$0.00 insurance policies Term life insurance through work Wilfredo Cruz \$0.00 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue

☐ Yes. Describe each claim.......

■ No

Case 16-36119

Doc 1

Filed 11/12/16

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		Case 16-36119	Doc 1	Filed 11/12/16 Document	Entered 1 Page 15 of	1/12/16 12:00:55 54	Desc Main
Deb Deb	tor 1 tor 2	Wilfredo Cruz Eva Cruz		Boodinen	1 age 10 of	Case number (if known)	
34. (Other c	contingent and unliquidate	ed claims of	every nature, including	g counterclaims	of the debtor and rights to	set off claims
	No					•	
	Yes.	Describe each claim					
35.	Anv fin	ancial assets you did not	already list				
_	l No	,	,				
	Yes.	Give specific information					
36.		he dollar value of all of yo art 4. Write that number he					\$7,453.75
Part	5: Des	scribe Any Business-Related	Property You	Own or Have an Interest I	n. List any real esta	ate in Part 1.	
		own or have any legal or equi			<u> </u>		
	•	to Part 6.	table interest	in any business-related p	operty?		
_		So to line 38.					
_	100. 0	o to line do.					
Part		scribe Any Farm- and Comme ou own or have an interest in fa			n or Have an Interes	st In.	
46. [Do you	own or have any legal or	equitable in	terest in any farm- or o	commercial fishir	ng-related property?	
	■ No.	Go to Part 7.	•	•			
	☐ Yes.	Go to line 47.					
Part	7:	Describe All Property You	Own or Have a	ın Interest in That You Dic	Not List Above		
53 I)o vou	have other property of a	ny kind you	did not already list?			
		ples: Season tickets, country					
	No						
	Yes.	Give specific information					
5 4	A .l .l 4l	ha dallan wakea af all af wa		om Dout 7 Muito that u			***
54.	Add ti	he dollar value of all of yo	our entries tr	om Part 7. Write that h	umber nere		\$0.00
Dort	٥.	List the Totals of Feeb Bort	of this Farm				
Part	o:	List the Totals of Each Part	or this Form				
55.	Part 1	: Total real estate, line 2					\$160,000.00
56.	Part 2	2: Total vehicles, line 5			\$14,000.00		
57.		: Total personal and hous		s, line 15	\$3,500.00		
58.		l: Total financial assets, li			\$7,453.75		
59.		i: Total business-related p			\$0.00		
60.		: Total farm- and fishing-		<u> </u>	\$0.00		
61.	Part 7	: Total other property not	usted, line	· · · · · · · · · · · · · · · · · · ·	\$0.00		
62.	Total	personal property. Add lir	es 56 throug	h 61	\$24,953.75	Copy personal property t	otal \$24,953.75
63.	Total	of all property on Schedu	i le A/B . Add l	ine 55 + line 62			\$184,953.75

Official Form 106A/B Schedule A/B: Property page 6

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		17(7(4)1111)	<u> </u>	
Fill in this infor	mation to identify your	case:		
Debtor 1	Wilfredo Cruz			
	First Name	Middle Name	Last Name	
Debtor 2	Eva Cruz			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Which set of exem	ptions are you claiming	? Check one only.	, even if your s	spouse is filing	with y	vou.
----	-------------------	-------------------------	-------------------	------------------	------------------	--------	------

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption	
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
210 E. Spring Street Yorkville, IL 60560 Kendall County	\$160,000.00		\$30,000.00	735 ILCS 5/12-901	
Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit		
Necessary wearing apparel for debtors and their dependents	\$500.00		\$500.00	735 ILCS 5/12-1001(a)	
Line from Schedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit		
Checking: Old Second National Bank	\$52.10		\$52.10	735 ILCS 5/12-1001(b)	
Line nom conequie / v Z.			100% of fair market value, up to any applicable statutory limit		
Checking: JP Morgan Chase Bank Line from Schedule A/B: 17.2	\$100.00		\$100.00	735 ILCS 5/12-1001(b)	
Ellie II oli ochedale A/B. TT-E			100% of fair market value, up to any applicable statutory limit		
Savings: Earthmover Credit Union Line from Schedule A/B: 17.3	\$25.00		\$25.00	735 ILCS 5/12-1001(b)	
Line nom Schedule AVD. 11.3			100% of fair market value, up to any applicable statutory limit		

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Eva Cruz Case number (if known) Debtor 2 Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Joint account with Wilfredo's 735 ILCS 5/12-1001(b) \$1.65 \$1.65 parents: Earthmover Credit Union 100% of fair market value, up to Line from Schedule A/B: 17.4 any applicable statutory limit **IRA: Wheatland Title Retirement** 735 ILCS 5/12-1006 100% \$4,000.00 Account Line from Schedule A/B: 21.1 100% of fair market value, up to any applicable statutory limit Anticipated tax refund for 2016 735 ILCS 5/12-1001(b) \$3,000.00 \$3,000.00 Line from Schedule A/B: 28.1 100% of fair market value, up to any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No

Debtor 1

Yes

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		Document Pa	ae 18 of 54		
Fill in this informa	tion to identify you	ur case:			
Debtor 1	Wilfredo Cruz				
Debtor 1	First Name	Middle Name Last	Name	_	
Debtor 2	Eva Cruz				
(Spouse if, filing)	First Name	Middle Name Last	Name	_	
United States Bank	runtay Court for the	: NORTHERN DISTRICT OF ILLINOIS	e		
United States Bank	rupicy Court for the	. NORTHERN DISTRICT OF IELINOR			
Case number					
(if known)				☐ Check	if this is an
				amend	ded filing
Official Form	<u>106D</u>				
Schedule D	: Creditors	s Who Have Claims Sec	cured by Proper	⁺t∨	12/15
			<u> </u>	<u> </u>	
		If two married people are filing together, bo out, number the entries, and attach it to this			
number (if known).	aditional rage, mrt	out, number the entries, and attach it to the	romi. On the top of any addit	nonai pages, write your na	inc and case
1. Do any creditors ha	ave claims secured b	y your property?			
☐ No. Check th	nis box and submit t	this form to the court with your other sche	dules. You have nothing els	e to report on this form.	
_		•	zalesi i ea mare mening ele	o to roport on time ronni	
	II of the information	below.			
Part 1: List All S	Secured Claims			0.1. 5	
		more than one secured claim, list the creditor s		Column B	Column C
		s a particular claim, list the other creditors in Pa ical order according to the creditor's name.	art 2. As Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
	trie ciairiis iii aipriabet	ical order according to the creditor's name.	value of collateral.		If any
	Credit Union	Describe the property that secures the cla	aim: \$12,419.00	\$9,000.00	\$3,419.00
Creditor's Name		2008 BMW 328i 110000 miles			
		Location: 210 E. Spring Street,			
		Yorkville IL 60560			
P O Box 293	37	As of the date you file, the claim is: Check apply.	all that		
Aurora, IL 6	0507	Contingent			
Number, Street, Ci	ity, State & Zip Code	☐ Unliquidated			
		☐ Disputed			
Who owes the debt	? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only		An agreement you made (such as mortga	ige or secured		
Debtor 2 only		car loan)			
Debtor 1 and Debt	or 2 only	☐ Statutory lien (such as tax lien, mechanic	's lien)		
At least one of the	debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this clair		Other (including a right to offset)			
community debt					
	Opened				
	02/13 Last				
	Active		4055		
Date debt was incurr	ed 6/20/16	Last 4 digits of account number	1955		
	Credit Union	Describe the property that secures the cla	aim: \$7,662.00	\$5,000.00	\$2,662.00
Creditor's Name		2006 Honda Pilot 80,000 miles			
		Location: 210 E. Spring Street,			
		Yorkville IL 60560 As of the date you file, the claim is: Check	all that		
P O Box 293	-	apply.	all triat		
Aurora, IL 6	50507	☐ Contingent			
Number, Street, Ci	ity, State & Zip Code	Unliquidated			
	•	Disputed			
Who owes the debt	? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only		An agreement you made (such as mortga	ige or secured		
Debtor 2 only		car loan)			
Debtor 1 and Debt	or 2 only	Statutory lien (such as tax lien, mechanic	's lien)		
☐ At least one of the	debtors and another	☐ Judgment lien from a lawsuit			

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Debtor 1	Wilfredo C	ruz				Case number (if know)		
	First Name	Middle N	lame	Last Name				
Debtor 2	Eva Cruz							
	First Name	Middle N	lame	Last Name				
	if this claim re nunity debt	elates to a	Other (in	cluding a right to offset)				
Date debt	was incurred	Opened 10/12 Last Active 6/17/16	Last	4 digits of account number	0510			
2.3 We	lls Fargo H	m Mortgag	Describe the	e property that secures the c	laim:	\$222,688.00	\$160,000.00	\$62,688.00
Cred	itor's Name			ring Street Yorkville, II endall County	L			
	80 Stagecoa derick, MD		As of the da apply.	ite you file, the claim is: Check	k all that			
Numl	ber, Street, City, S	State & Zip Code	☐ Unliquida	ated				
Who owe	s the debt? C	heck one.	Nature of li	en. Check all that apply.				
☐ Debtor ☐ Debtor	,		An agree car loan	ment you made (such as morto)	gage or se	cured		
Debtor	1 and Debtor 2	only	☐ Statutory	lien (such as tax lien, mechani	ic's lien)			
		tors and another	☐ Judamen	t lien from a lawsuit				
	if this claim re unity debt	elates to a		cluding a right to offset)				
Date debt	was incurred	Opened 05/13 Last Active 5/20/16	Last	4 digits of account number	7252			
		•		nis page. Write that number h	nere:	\$242,769	.00	
	the last page of the last number here		the dollar val	ue totals from all pages.		\$242,769	.00	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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		Document	Page 20 of 54	_
Fill in this info	rmation to identify your	case:		
Debtor 1	Wilfredo Cruz			
	First Name	Middle Name	Last Name	
Debtor 2	Eva Cruz First Name	MC I II A		
(Spouse if, filing)	FIRST Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	NORTHERN DISTRICT OF I	LLINOIS	
Case number (if known)				Check if this is an amended filing
	E/F: Creditors W	/ho Have Unsecured		12/15
any executory con Schedule G: Exect Schedule D: Cred left. Attach the Con name and case nu	ntracts or unexpired leases cutory Contracts and Unexp itors Who Have Claims Sec ontinuation Page to this pag umber (if known).	that could result in a claim. Also ired Leases (Official Form 106G). ured by Property. If more space is ge. If you have no information to r	ITY claims and Part 2 for creditors with NO olist executory contracts on Schedule A/B Do not include any creditors with partially s needed, copy the Part you need, fill it ou report in a Part, do not file that Part. On the	y secured claims that are listed in t, number the entries in the boxes on the
	All of Your PRIORITY Un tors have priority unsecure			_
No. Go to	• •	u ciaiilis agailist you!		
	Part 2.			
Yes.	All of Your NONPRIORIT	DV 11		
☐ No. You h ☐ Yes. 4. List all of you unsecured clathan one cred	ur nonpriority unsecured cl	art. Submit this form to the court wit aims in the alphabetical order of your cach claim. For each claim liste	th your other schedules. the creditor who holds each claim. If a creed, identify what type of claim it is. Do not list under the more than three nonpriority unsecured.	claims already included in Part 1. If more
Part 2.				Total claim
4.1 Aurora	a Pediatric Clinic	Last 4 digits of ac	ccount number	Unknown
	ity Creditor's Name			<u> </u>
#4 Aurora Number	Jorth Highland Avenu a, IL 60506 Street City State Zlp Code		bt incurred? u file, the claim is: Check all that apply	
Debto	curred the debt? Check one.	-		
☐ Debto	•	☐ Contingent		
_	·	☐ Unliquidated		
	or 1 and Debtor 2 only	Disputed	DRITY unacquired olding:	
	ast one of the debtors and and	По	DRITY unsecured claim:	
debt	ck if this claim is for a comi aim subject to offset?	munity — • • • • • • • • • • • • • • • • • •	sing out of a separation agreement or divorce	that you did not
■ No			on or profit-sharing plans, and other similar de	ebts
☐ Yes		Other. Specify		

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Debto	r 2 Eva Cruz		Case number (if know	n)	
4.2	Chase Card Nonpriority Creditor's Name	Last 4 digits of account number	1088		\$1,985.00
	Po Box 15298 Wilmington, DE 19850	When was the debt incurred?	Opened 08/07 I 7/26/15	Last Active	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply		
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or div	orce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other simil	ar debts	
	Yes	Other. Specify Credit Card			
4.3	Discover Fin Svcs Llc Nonpriority Creditor's Name	Last 4 digits of account number	9091	_	\$8,396.00
	Po Box 15316 Wilmington, DE 19850	When was the debt incurred?	Opened 03/02 I 7/26/15	Last Active	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply		
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	☐ Disputed			
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or div	orce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other simil	ar debts	
	Yes	Other. Specify Credit Card	<u> </u>		
4.4	Dr. Timothy J. Clare Nonpriority Creditor's Name	Last 4 digits of account number			\$2,000.00
	200 Hillcrest Ave Yorkville, IL 60560	When was the debt incurred?			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply		
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	☐ Disputed			
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	ration agreement or div	vorce that you did not	
	Is the claim subject to offset?	report as priority claims		lan dahan	
	■ No	☐ Debts to pension or profit-sharin	g pians, and other simil	ai dedts	
	Yes	Other. Specify Braces			

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Debt	or 2 Eva Cruz		Case number (if know)	
4.5	Dreyer Medical Group	Last 4 digits of account number		Unknown
	Nonpriority Creditor's Name PO Box 105173	When was the debt incurred?		
	Atlanta, GA 30348 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	,	,	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt	☐ Obligations arising out of a sep	aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-shari		
	Yes	■ Other. Specify Medical Bi	lls	
4.6	Earthmovers Cu	Last 4 digits of account number	7812	\$1,191.00
	Nonpriority Creditor's Name	_	Opened 04/09 Leet Active	_
	Po Box 2937 Aurora, IL 60507	When was the debt incurred?	Opened 04/08 Last Active 5/26/16	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sep report as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-shari	ng plans, and other similar debts	
	Yes	■ Other Specify Credit Care	d	
4.7	Edward Hospital Nonpriority Creditor's Name	Last 4 digits of account number		Unknown
	PO Box 4207	When was the debt incurred?		
	Carol Stream, IL 60197		in Old I was a	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	Пол		
	Debtor 2 only	Contingent		
	_	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	od claim:	
	At least one of the debtors and another	Student loans		
	☐ Check if this claim is for a community debt		aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	a.a agreement of arronde that you did not	
	■ No	Debts to pension or profit-shari	ng plans, and other similar debts	
	☐ Yes	Other. Specify Medical Bi	lls	

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Debto	or 2 Eva Cruz		Case number (if know)	
4.8	Jared-galleria Of Jwlr Nonpriority Creditor's Name	Last 4 digits of account number	2557	\$1,894.00
	375 Ghent Rd Akron, OH 44333	When was the debt incurred?	Opened 2/13/13 Last Active 7/10/15	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d alaim.	
	☐ At least one of the debtors and another	Student loans	a ciaim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	_	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharir	g plans, and other similar debts	
	□Yes	Other. Specify Charge Acc	count	
4.9	Kohls/capone	Last 4 digits of account number	6785	\$3,606.00
	Nonpriority Creditor's Name N56 W 17000 Ridgewood Dr Menomonee Falls, WI 53051	When was the debt incurred?	Opened 07/03 Last Active 7/23/15	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure ☐ Student loans	d claim:	
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Charge Acc	count	
4.1	Merchants Credit Guide	Last 4 digits of account number	0107	\$211.00
0]	Nonpriority Creditor's Name 223 W Jackson Blvd Ste 4	When was the debt incurred?	Opened 11/15	V 2.1330
	Chicago, IL 60606 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that anniv	
	Who incurred the debt? Check one.	7.0 0. 11.0 44.0 , 04 11.0, 11.0 0.41111	or chook an that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	□ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharir		
	Yes	■ Other. Specify Collection	Attorney Edward Hospital	

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Debto	r 2 Eva Cruz		Case number (if know)	
4.1	Nhhelc/gsm&r	Last 4 digits of account number	5549	\$8,100.00
	Nonpriority Creditor's Name Po Box 3420 Concord, NH 03302	When was the debt incurred?	Opened 09/15 Last Active 7/31/16	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	_ ′	☐ Disputed		
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecure	d claim:	
	At least one of the debtors and another	Student loans		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	_	ration agreement or divorce that you d	id not
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other. Specify		
	□ res	Educationa		
		Educationa	ı	
4.1	Thd/cbna	Last 4 digits of account number	5965	\$4,251.00
	Nonpriority Creditor's Name		Opened 07/07 Last Active	
	Po Box 6497	When was the debt incurred?	8/29/15	
	Sioux Falls, SD 57117	As of the data way file the plains	as Ob a she shi shi she sa sa he	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Cneck all that apply	
	Debtor 1 only	Пол		
	Debtor 2 only	☐ Contingent		
	<u> </u>	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed	l alaine.	
	At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	i claim:	
	☐ Check if this claim is for a community debt	<u> </u>		
	Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you d	d not
	No	Debts to pension or profit-sharing		
	Yes	Other. Specify Charge Acc	count	
is try have notif Name :	this page only if you have others to be notified a ving to collect from you for a debt you owe to so more than one creditor for any of the debts that ied for any debts in Parts 1 or 2, do not fill out o and Address	bout your bankruptcy, for a debt that y meone else, list the original creditor in you listed in Parts 1 or 2, list the addi r submit this page. On which entry in Part 1 or Part 2 did you Line 4.3 of (Check one):	Parts 1 or 2, then list the collection tional creditors here. If you do not h	agency here. Similarly, if you ave additional persons to be
	ilo, NY 14206	Last 4 digits of account number	Part 2. Creditors with Nonphority Ons	ecured Claims
North PO B	nland Group ox 390846 eapolis, MN 55439		list the original creditor? Part 1: Creditors with Priority Unsecut Part 2: Creditors with Nonpriority Uns	
Part 4	Add the Amounts for Each Type of Un	secured Claim		
6. Tota	I the amounts of certain types of unsecured clair of unsecured claim.		eporting purposes only. 28 U.S.C. §1	59. Add the amounts for each
			Total Claim	
	6a. Domestic support obligations		6a. \$	0.00

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Debtor 1 Wilfredo Cruz Debtor 2 Eva Cruz Case number (if know) claims from Part 1 Taxes and certain other debts you owe the government 6b. 0.00 6b. 6c. Claims for death or personal injury while you were intoxicated 6c. 0.00 Other. Add all other priority unsecured claims. Write that amount here. 0.00 6d. 6d. Total Priority. Add lines 6a through 6d. 6e. 0.00 **Total Claim** 6f. Student loans 6f. 8,100.00 Total claims Obligations arising out of a separation agreement or divorce that from Part 2 0.00 6g. you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts 6h. 0.00 Other. Add all other nonpriority unsecured claims. Write that amount 6i. 6i. 23,534.00

6j.

31,634.00

Total Nonpriority. Add lines 6f through 6i.

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		17(7(4)1111)		+
Fill in this inform	mation to identify your	case:		
Debtor 1	Wilfredo Cruz			
	First Name	Middle Name	Last Name	
Debtor 2	Eva Cruz			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number _				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	whom you have the r, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
					_
	Number	Street			
	City		State	ZIP Code	
2.2					
	Name				_
					_
	Number	Street			
	City		State	ZIP Code	
2.3					
	Name				_
					_
	Number	Street			
					_
	City		State	ZIP Code	
2.4					
	Name				
	Ni	04			_
	Number	Street			
	City		04-4-	71D O	_
0.5	City		State	ZIP Code	
2.5					_
	Name				
	Number	Street			_
		211001			
	City		State	ZIP Code	_
	Uity		Olaic	_II 0000	

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		Docume	ent Page 27 d	of 54
Fill in this i	information to identify your	case:		
Debtor 1	Wilfredo Cruz			
Dobtor 1	First Name	Middle Name	Last Name	
Debtor 2	Eva Cruz			
(Spouse if, filing	g) First Name	Middle Name	Last Name	
United State	es Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case numb	er			
(if known)				☐ Check if this is an
				amended filing
Sched	Form 106H ule H: Your Cod		to use manufactor Do	12/15
people are fill it out, and cour name a	filing together, both are equ d number the entries in the and case number (if known)	ally responsible for supp boxes on the left. Attach Answer every question	olying correct informa the Additional Page	as complete and accurate as possible. If two married tion. If more space is needed, copy the Additional Page, to this page. On the top of any Additional Pages, write
1. Do y	ou have any codebtors? (If	you are filing a joint case,	do not list either spouse	e as a codebtor.
■ No □ Yes				
	in the last 8 years, have you a, California, Idaho, Louisiana			ry? (Community property states and territories include nington, and Wisconsin.)
`	Go to line 3. Did your spouse, former spo	use, or legal equivalent live	e with you at the time?	
in line Form 1	2 again as a codebtor only i	f that person is a guaran	tor or cosigner. Make	r if your spouse is filing with you. List the person shown sure you have listed the creditor on Schedule D (Officia 06G). Use Schedule D, Schedule E/F, or Schedule G to fi
	Column 1: Your codebtor ame, Number, Street, City, State and Z	IP Code		Column 2: The creditor to whom you owe the debt Check all schedules that apply:
3.1				☐ Schedule D, line
	lame			☐ Schedule E/F, line
				☐ Schedule G, line
	lumber Street City	State	ZIP Code	
3.2				Cabadula D. lina
	lame			□ Schedule D, line □ Schedule E/F, line
				☐ Schedule G, line
_				
	lumber Street City	State	ZIP Code	
Ĺ	rity .	Sidle	ZIP Code	

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De	otor 1 Wilfredo Cr	uz			
	otor 2 Eva Cruz				
Uni	ted States Bankruptcy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS		
	se number nown)		-		•
0	fficial Form 106I			MM / DD/	
S	chedule I: Your Inc	ome		, 22,	12/15
Pa 1.	Describe Employment Fill in your employment		Debtor 1	Debtor	2 or non-filing spouse
	information.				2 or non-filing spouse
	If you have more than one job, attach a separate page with information about additional	Employment status	■ Employed□ Not employed	■ Empl	oyed employed
	employers.	Occupation	Technician	Admin	istration
	Include part-time, seasonal, or self-employed work.	Employer's name	Porter Installations, Inc.	Wheatl	and Title Guaranty Co.
	Occupation may include student or homemaker, if it applies.	Employer's address	3474 Colony Bay Drive Rockford, IL 61109		est Veterans Parkway lle, IL 60560
		How long employed t	here? 8 months		13 years
	Give Details About Mo	nthly Income			
Pai				as write CO in the	
Esti	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to report for any lir	ie, wille po ili tile	space. Include your non-filing
Esti spo	use unless you are separated.	ore than one employer, co	you have nothing to report for any lir		

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

- Estimate and list monthly overtime pay. 3.
- Calculate gross Income. Add line 2 + line 3.

non-t			
\$	3,915.77	\$_	2.
+\$_	0.00	+\$_	3.
\$_	3,915.77	\$_	4.
-1	\$	3,915.77 \$	\$ 3,915.77 \$ +\$ 0.00 +\$

Official Form 106I Schedule I: Your Income page 1

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Debt Debt		Wilfredo Cruz Eva Cruz		C	Case	e number (<i>if known</i>)	_			
					Fo	r Debtor 1		For Debtor non-filing s		
	Cop	y line 4 here	4.	-	\$_	3,915.77	_		166.67	
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a.		\$	586.91	!	\$	523.81	
	5b.	Mandatory contributions for retirement plans	5b.		\$	0.00		\$	0.00	-
	5c.	Voluntary contributions for retirement plans	5c.		\$	0.00	:	\$	162.50	-
	5d.	Required repayments of retirement fund loans	5d.		\$	0.00	:	\$	0.00	-
	5e.	Insurance	5e.		\$	336.74	:	\$	0.00	-
	5f.	Domestic support obligations	5f.		\$	0.00	;	\$	0.00	-
	5g.	Union dues	5g.		\$	0.00	;	\$	0.00	-
	5h.	Other deductions. Specify: Life Ins	_ 5h.	.+	\$_	0.00	+ :	\$	15.21	
		Flex medical account			\$_	0.00	,	\$	208.33	-
6.	Add	I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	;	\$_	923.65	;	\$	909.85	-
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	:	\$_	2,992.12	;	\$3,	256.82	=
8.	8b. 8c.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8a. 8b. 8c.		\$_ \$_ \$_	0.00	;	\$ \$	0.00	-
	8d.	Unemployment compensation	8d.		\$ -	0.00		\$	0.00	-
	8e.	Social Security	8e.		\$-	0.00		\$	0.00	-
	8f. 8g. 8h.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income Other monthly income. Specify:			\$_ \$_ \$_	0.00 0.00 0.00	;	\$ \$	0.00 0.00 0.00	-
		· · · · · · · · · · · · · · · · · · ·	_	Γ.			Г			T
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	<u> </u>	0.00	Ŀ	\$	0.00	0
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$_		2,992.12 + \$_	_	3,256.82	= \$	6,248.94
11.	Inclu othe	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a cify:	depe			. ,	,			0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certain lies							\$Combin	6,248.94
13.	Do y	you expect an increase or decrease within the year after you file this form No. Yes Explain:	?							y income

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E'll in this info	and the state of t				
	mation to identify your case:				
Debtor 1	Wilfredo Cruz			k if this is: An amended filing	
Debtor 2	Eva Cruz			A supplement show	ving postpetition chapter
(Spouse, if filing))		1	13 expenses as of	the following date:
United States Ba	ankruptcy Court for the: NORTHERN DISTRICT OF ILLIN	OIS	1	MM / DD / YYYY	
Case number					
(If known)					
O#:=:=1 F	400 l				
	Form 106J				
	le J: Your Expenses te and accurate as possible. If two married people at	re filing together, both a	re equa	ılly responsible fo	12/
information. I	f more space is needed, attach another sheet to this own). Answer every question.				
	scribe Your Household				
	joint case? o to line 2.				
	Does Debtor 2 live in a separate household?				
_	No				
	Yes. Debtor 2 must file Official Form 106J-2, <i>Expenses</i>	s for Separate Household	of Debto	or 2.	
2. Do you h	nave dependents?				
Do not lis Debtor 2.	t Debtor 1 and ■ Yes. Fill out this information for each dependent	Dependent's relationshi Debtor 1 or Debtor 2	ip to	Dependent's age	Does dependent live with you?
Do not sta		Doughtor		11	□ No ■
aepenaer	nts names.	Daughter			■ Yes □ No
		Son		13	■ Yes
					□ No
		Daughter		15	■ Yes
				40	□ No
		Son			■ Yes
		Son		20	□ No ■ Yos
3. Do your	expenses include No				■ Yes
	s of people other than and your dependents?				
	timate Your Ongoing Monthly Expenses r expenses as of your bankruptcy filing date unless y	ou are using this form a	e a sur	onlement in a Cha	nter 13 case to report
expenses as	of a date after the bankruptcy is filed. If this is a supp				
applicable da	te.				
	nses paid for with non-cash government assistance i uch assistance and have included it on <i>Schedule I:</i> \				
(Official Form		rour income		Your exp	enses
	al or home ownership expenses for your residence. Is and any rent for the ground or lot.	nclude first mortgage	4. \$		1,480.00
If not inc	luded in line 4:				
4a. Re	al estate taxes		4a. \$		0.00
4b. Pro	operty, homeowner's, or renter's insurance		4b. \$		0.00
	me maintenance, repair, and upkeep expenses		4c. \$		75.00
	meowner's association or condominium dues al mortgage payments for your residence, such as ho	me equity loans	4d. \$ 5. \$		0.00
J. Madition	jour leading in a lie de leading de leading	oquity iouilo	σ. ψ		9.00

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Debtor 1 Wilfredo Cruz
Debtor 2 Eva Cruz Case number (if known)

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Debtor 1 Debtor 2	Wilfredo Cruz Eva Cruz	Case num	nber (if known)	
6. Util	ties:			
6a.	Electricity, heat, natural gas	6a.	\$	250.00
6b.	Water, sewer, garbage collection	6b.	\$	140.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	· · · · · · · · · · · · · · · · · · ·	280.00
6d.	Other. Specify:	6d.	· ·	0.00
7. Fo c	d and housekeeping supplies	— _{7.}		1,200.00
	dcare and children's education costs	8.	·	400.00
9. Clo	hing, laundry, and dry cleaning	9.	· ·	150.00
	sonal care products and services	10.	\$	250.00
	ical and dental expenses	11.	\$	350.00
	nsportation. Include gas, maintenance, bus or train fare.			 -
	not include car payments.	12.	\$	350.00
Ent	ertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	120.00
4. Cha	ritable contributions and religious donations	14.	\$	50.00
5. Ins i	rance.			
	not include insurance deducted from your pay or included in lines 4 or 20.		_	
	Life insurance	15a.	· .	0.00
	Health insurance	15b.	· <u> </u>	0.00
	Vehicle insurance	15c.	·	145.00
	Other insurance. Specify:	15d.	\$	0.00
	es. Do not include taxes deducted from your pay or included in lines 4 or 20.		•	
Spe	•	16.	\$	0.00
	allment or lease payments:	47-	œ.	222.22
	Car payments for Vehicle 1	17a.	· · · · · · · · · · · · · · · · · · ·	360.00
	Car payments for Vehicle 2	17b.	·	280.00
	Other. Specify:	17c.	·	0.00
	Other. Specify:	17d.	\$	0.00
	r payments of alimony, maintenance, and support that you did not report as ucted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
	er payments you make to support others who do not live with you.		\$	0.00
	cify:	19.	·	0.00
	er real property expenses not included in lines 4 or 5 of this form or on Sche			
	Mortgages on other property	20a.		0.00
	Real estate taxes	20b.	·	0.00
	Property, homeowner's, or renter's insurance	20c.		0.00
	Maintenance, repair, and upkeep expenses	20d.	·	0.00
	Homeowner's association or condominium dues	20e.		0.00
	er: Specify: Pet supplies/food/veterninary bills	21.	· <u> </u>	60.00
	nool Lunches		+\$	
	ra-curricular activities		+\$	80.00 125.00
			+\$	
	gazines/Newspapers		+\$	15.00 10.00
	tage		ΤΨ	10.00
2. Cal	culate your monthly expenses			
22a	Add lines 4 through 21.		\$	6,170.00
22b	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22c	Add line 22a and 22b. The result is your monthly expenses.		\$	6,170.00
				·
	culate your monthly net income. Copy line 12 (your combined monthly income) from Schedule I.	226	c	6.040.04
	1,5 0	23a.	· ·	6,248.94
230	Copy your monthly expenses from line 22c above.	23b.		6,170.00
23c	Subtract your monthly expenses from your monthly income.			70.04
	The result is your monthly net income.	23c.	\$	78.94
For	you expect an increase or decrease in your expenses within the year after yo example, do you expect to finish paying for your car loan within the year or do you expect your fication to the terms of your mortgage?			ease or decrease because of a
_ ·				

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Fill in this	information to identify your	case:				
Debtor 1	Wilfredo Cruz					
	First Name	Middle Name	Last	Name		
Debtor 2	Eva Cruz					
(Spouse if, filing	ng) First Name	Middle Name	Last	Name		
United Sta	ates Bankruptcy Court for the:	NORTHERN DISTRICT (OF ILLINOI	S		
Case num	ber					
(if known)						☐ Check if this is an amended filing
if two marr You must f obtaining i		r, both are equally respond le bankruptcy schedules on connection with a bankr	sible for so	upplyired sche	ng correct information.	tatement, concealing property, or 0,000, or imprisonment for up to 20
Did y	ou pay or agree to pay some	one who is NOT an attorn	ey to help	you fil	l out bankruptcy forms	?
	No					
	Yes. Name of person					Bankruptcy Petition Preparer's Notice, tion, and Signature (Official Form 119)
	r penalty of perjury, I declare hey are true and correct.	that I have read the summ	nary and s	chedul	es filed with this declar	ation and
Х /с	s/ Wilfredo Cruz		X	/s/ Fv	a Cruz	
	Vilfredo Cruz		^	Eva		
	ignature of Debtor 1				ture of Debtor 2	
D	November 12, 2016			Date	November 12, 2016	

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		nation to identify you	case:					
Debt	or 1	Wilfredo Cruz First Name	Middle Name	Last Name				
Debt	or 2	Eva Cruz						
(Spou	se if, filing)	First Name	Middle Name	Last Name				
Unite	ed States Ba	nkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS				
Case (if kno	e number wn)				_	Check if this is an		
Sta Be as	s complete a	of Financial	ble. If two married people a attach a separate sheet to		equally responsible for sup y additional pages, write you			
Part		,	rital Status and Where You	ı Lived Before				
	•	current marital statu						
 	■ Married□ Not mar	ried						
2.	During the la	ast 3 years, have you	lived anywhere other than	where you live now?				
 	 ■ No □ Yes. List all of the places you lived in the last 3 years. Do not include where you live now. 							
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	ldress:	Dates Debtor 2 lived there		
states 	■ No	es include Arizona, Ca		vada, New Mexico, Puerto R	ity property state or territor ico, Texas, Washington and V			
Part		n the Sources of You	,	,				
I	Fill in the tota	I amount of income yo	u received from all jobs and	ng a business during this you all businesses, including part e together, list it only once un		ndar years?		
	□ No ■ Yes. Fill	in the details.						
			Debtor 1		Debtor 2			
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)		
the date voll filed for pankfillitch.			■ Wages, commissions, bonuses, tips	\$26,415.27	■ Wages, commissions, bonuses, tips	\$42,307.76		
			☐ Operating a business		☐ Operating a business			

Official Form 107

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Wilfredo Cruz Debtor 1 Debtor 2 Eva Cruz Case number (if known) Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) For last calendar year: \$34,219.62 \$51,020.93 Wages, commissions, Wages, commissions, (January 1 to December 31, 2015) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business For the calendar year before that: \$12,198.46 \$42,612.43 Wages, commissions. Wages, commissions. (January 1 to December 31, 2014) bonuses, tips bonuses, tips ☐ Operating a business Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. No Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Gross income from Sources of income **Gross income** Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) For the calendar year before that: Unemployment \$9,537.00 (January 1 to December 31, 2014) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose," During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? □ No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? □ No. Go to line 7. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

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Wilfredo Cruz Debtor 1 Case number (if known) Debtor 2 Eva Cruz

	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for			
	Wells Fargo Hm Mortgag 8480 Stagecoach Cir Frederick, MD 21701	September, October, November mortgage payments	\$4,440.00	\$222,688.00	■ Mortgage □ Car □ Credit Card □ Loan Repayment □ Suppliers or vendors □ Other			
	Earthmover Credit Union P O Box 2937 Aurora, IL 60507	September, October, November car payments for the BMW	\$840.00	\$12,419.00	☐ Mortgage ■ Car □ Credit Card □ Loan Repayment □ Suppliers or vendors □ Other			
	Earthmover Credit Union P O Box 2937 Aurora, IL 60507	September, October, November car payments for the Honda	\$1,080.00	\$7,662.00	☐ Mortgage ■ Car □ Credit Card □ Loan Repayment □ Suppliers or vendors □ Other			
7.	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider.							
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment			
8.	Within 1 year before you filed for bankrup insider? Include payments on debts guaranteed or co No Yes. List all payments to an insider		ments or transfer a	any property on a	ccount of a debt that benefited an			
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name			
Par	t 4: Identify Legal Actions, Repossession	ns, and Foreclosures						
9.	Vithin 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? ist all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody nodifications, and contract disputes.							
	Yes. Fill in the details. Case title	Nature of the case	Court or agency		Status of the case			
	Case number	Hature or the case	Journ of agency		Ciaids of the case			

7.

8.

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_	otor 2	Eva Cruz		Ca	ise number (if	known)	
10.		n 1 year before you filed for banl k all that apply and fill in the details		s any of your property repossessed,	foreclosed,	garnished, attached	l, seized, or levied?
	I	No. Go to line 11.					
	_	Yes. Fill in the information below.					
	Cred	litor Name and Address	Des	cribe the Property		Date	Value of th
			Ev.	lain what happened			propert
			EXP	пант мнаспарренец			
11.	accou	unts or refuse to make a paymen		lid any creditor, including a bank or fi you owed a debt?	inancial inst	itution, set off any a	mounts from your
	_ '	No Yes. Fill in the details.					
		litor Name and Address	Des	cribe the action the creditor took		Date action was	Amour
	Orea	intor Hame and Address	Des	or be the action the creator took		taken	Allioui
12.		n 1 year before you filed for banl -appointed receiver, a custodian		is any of your property in the possess r official?	sion of an as	signee for the bene	fit of creditors, a
		No					
		Yes					
Pai	t 5:	List Certain Gifts and Contribut	ions				
12	\A/i+bi	n 2 veers hefere you filed for her	nkruntov d	id you give ony gifts with a total value	o of more the	on \$600 per person	•
13.	I	No Yes. Fill in the details for each gift.	nkruptcy, a	id you give any gifts with a total value	e or more tha	an \$600 per person	
		s with a total value of more than	\$600	Describe the gifts		Dates you gave	Valu
	per p	person		Describe the girts		the gifts	Valu
	Pers Add	on to Whom You Gave the Gift a	ind				
14.	_	•	nkruptcy, d	id you give any gifts or contributions	with a total	value of more than	\$600 to any charity
	_ '	No Yes. Fill in the details for each gift o	or contribution	on.			
		or contributions to charities tha		Describe what you contributed		Dates you	Valu
		e than \$600	at total	Describe what you contributed		contributed	Valu
		rity's Name ress (Number, Street, City, State and ZIP (2-d-)				
			Jode)				
Pai	t 6:	List Certain Losses					
15.		n 1 year before you filed for banl mbling?	kruptcy or	since you filed for bankruptcy, did yo	u lose anyth	ing because of thef	t, fire, other disaste
		No					
		Yes. Fill in the details.					
		cribe the property you lost and	Describ	e any insurance coverage for the los	is	Date of your	Value of propert
	how	the loss occurred		the amount that insurance has paid. Lis		loss	los
			insuran	ce claims on line 33 of Schedule A/B: Pr	roperty.		
Pai	t 7:	List Certain Payments or Transf	fers				
16.	consi	ulted about seeking bankruptcy	or preparin	d you or anyone else acting on your b g a bankruptcy petition? , or credit counseling agencies for service			ty to anyone you
		No					
	_ `	Yes. Fill in the details.					
		on Who Was Paid		Description and value of any preper	·tv	Date navment	Amount o
	Addı			Description and value of any proper transferred	Ly	Date payment or transfer was	paymen
		il or website address on Who Made the Payment, if No	ot Vou			made	
	1-612	on wino made the rayinelit, if NC	J. I Ou				

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Wilfredo Cruz Debtor 1 Debtor 2 Eva Cruz

Case number (if known)

	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and variansferred	alue of any pro	perty	Date payment or transfer was made	Amount of payment
	Dreyer, Foote, Streit, Furgason & Slocum 1999 West Downer Place Aurora, IL 60506 mhuseman@dreyerfoote.com	Attorney fees a	nd costs		August 24, 2016 - \$2000 legal fees October 12, 2016 - \$381 credit report and filing fee	\$2,381.00
17.	Within 1 year before you filed for bankruptcy promised to help you deal with your credito Do not include any payment or transfer that you	rs or to make payments			or transfer any prope	rty to anyone who
	■ No					
	Yes. Fill in the details.					
	Person Who Was Paid Address	Description and value transferred	alue of any pro	perty	Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bankrupt transferred in the ordinary course of your be include both outright transfers and transfers mainclude gifts and transfers that you have alread No Yes. Fill in the details.	usiness or financial affa ade as security (such as	airs? the granting of a			
	Person Who Received Transfer Address Person's relationship to you	Description and various property transfer		payment	e any property or es received or debts exchange	Date transfer was made
19.	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No					
	Yes. Fill in the details. Name of trust	Description and	value of the pro	perty transfe	rred	Date Transfer was
						made
Par	8: List of Certain Financial Accounts, Ins	struments, Safe Deposi	t Boxes, and St	orage Units		
20.	Within 1 year before you filed for bankruptc	y, were any financial ac	counts or instr	uments held	in your name, or for yo	our benefit, closed,
	sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No					
	Yes. Fill in the details.					
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account instrument	c m	ate account was losed, sold, noved, or ansferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 y cash, or other valuables?	vear before you filed fo	r bankruptcy, ar	ny safe depos	sit box or other deposi	tory for securities,
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S		Describe the	e contents	Do you still have it?
		State and ZIP Code)				

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Debtor 1 Wilfredo Cruz Debtor 2 Eva Cruz

Case number (if known)

22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?					
	No					
	Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?		
Par	19: Identify Property You Hold or Control for S	omeone Else				
23.	Do you hold or control any property that someor for someone.	ne else owns? Include any proper	ty you borrowed from, are storing for	or hold in trust		
	■ No					
	☐ Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value		
Par	t 10: Give Details About Environmental Information	tion				
For	the purpose of Part 10, the following definitions a	pply:				
_	Environmental law means any federal, state, or letoxic substances, wastes, or material into the air regulations controlling the cleanup of these substances.	r, land, soil, surface water, ground stances, wastes, or material.	lwater, or other medium, including sta	atutes or		
	Site means any location, facility, or property as of to own, operate, or utilize it, including disposal s		aw, whether you now own, operate, o	or utilize it or used		
	Hazardous material means anything an environm hazardous material, pollutant, contaminant, or si		waste, hazardous substance, toxic s	ubstance,		
Rep	ort all notices, releases, and proceedings that you	u know about, regardless of when	they occurred.			
24.	Has any governmental unit notified you that you	may be liable or potentially liable	under or in violation of an environme	ental law?		
	■ No □ Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice		
25.	Have you notified any governmental unit of any release of hazardous material?					
	■ No □ Yes. Fill in the details.					
	Name of site	Governmental unit	Environmental law, if you	Date of notice		
	Address (Number, Street, City, State and ZIP Code)	Address (Number, Street, City, State and ZIP Code)		Date of flotice		
26.	Have you been a party in any judicial or administ	rative proceeding under any envi	ronmental law? Include settlements a	nd orders.		
	■ No □ Yes. Fill in the details.					
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case		
Par	t11: Give Details About Your Business or Conn	ections to Any Business				
27.	Within 4 years before you filed for bankruptcy, d	id you own a business or have an	y of the following connections to any	business?		
	☐ A sole proprietor or self-employed in a tr	•	·			
	☐ A member of a limited liability company (LLC) or limited liability partnershi	ip (LLP)			

Entered 11/12/16 12:00:55 Case 16-36119 Doc 1 Filed 11/12/16 Desc Main Page 40 of 54 Document Wilfredo Cruz Debtor 1 Debtor 2 Eva Cruz Case number (if known) ■ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number** Do not include Social Security number or ITIN. Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name **Date Issued** Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Wilfredo Cruz /s/ Eva Cruz Wilfredo Cruz **Eva Cruz** Signature of Debtor 1 Signature of Debtor 2 Date November 12, 2016 Date November 12, 2016 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

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Fill in this inform	nation to identify your c	ase:		
Debtor 1	Wilfredo Cruz			
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	Eva Cruz First Name	Middle Name	Last Name	
	nkruptcy Court for the:		TRICT OF ILLINOIS	
	riniapioy Court for the.	NORTH ETT BIO	THE TELENOIS	
Case number (if known)				Check if this is an amended filing
Official Fo		a for India	/iduals Filing Under Chapt	tor 7
Statemen	it of lifterition	i ioi iliuly	riduals Filling Officer Chapt	IEF / 12/15
If you are an indi	vidual filing under chap	ter 7, you must fil	Il out this form if:	
creditors have	e claims secured by you	r property, or		
You must file this	ver is earlier, unless the	thin 30 days after	ot expired. you file your bankruptcy petition or by the date see time for cause. You must also send copies to t	
	eople are filing together and date the form.	in a joint case, bo	oth are equally responsible for supplying correct	information. Both debtors must
	and accurate as possiblour name and case num		s needed, attach a separate sheet to this form. O	n the top of any additional pages,
Part 1: List Yo	our Creditors Who Have	Secured Claims		
1. For any creditorinformation be		rt 1 of Schedule D	Creditors Who Have Claims Secured by Proper	rty (Official Form 106D), fill in the
	editor and the property th	at is collateral	What do you intend to do with the property th secures a debt?	at Did you claim the property as exempt on Schedule C?
Creditor's E	arthmover Credit Uni	on	☐ Surrender the property. ☐ Retain the property and redeem it.	□ No
.	PINI / /		Retain the property and enter into a	■ Yes
property securing debt:	2008 BMW 328i 110 Location: 210 E. Sp Yorkville IL 60560		Reaffirmation Agreement. Retain the property and [explain]:	
Creditor's E	arthmover Credit Uni	on	☐ Surrender the property.	□ No
name:			Retain the property and redeem it.	■ V
Description of			Retain the property and enter into a Reaffirmation Agreement.	Yes
property securing debt:	Location: 210 E. Sp Yorkville IL 60560	ring Street,	Retain the property and [explain]:	
	/ells Fargo Hm Mortg	ag	☐ Surrender the property.	□No
name:			Retain the property and redeem it.	- v
Description of			☐ Retain the property and enter into a Reaffirmation Agreement.	Yes
property	60560 Kendall Cou	nty	Retain the property and [explain]:	

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

■ Retain the property and [explain]:

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Debtor 1 Debtor 2	Wilfredo Cruz Eva Cruz	Case number (if known)	
securin	ng debt:	Retain and pay	_
For any unin the info	rmation below. Do not list real estate	erty Leases at you listed in Schedule G: Executory Contracts and Unexpire e leases. Unexpired leases are leases that are still in effect; the erty lease if the trustee does not assume it. 11 U.S.C. § 365(p)	e lease period has not yet ended.
Describe	your unexpired personal property le	eases	Will the lease be assumed?
	name: on of leased		□ No
Property:			☐ Yes
Lessor's r	name: on of leased		□ No
Property:	on or reased		☐ Yes
Lessor's r			□ No
Description Property:	on of leased		☐ Yes
Lessor's r			□ No
Property:	on of leased		☐ Yes
Lessor's r			□ No
Property:	on of leased		☐ Yes
Lessor's r			□ No
Property:	on of leased		☐ Yes
Lessor's r	name: on of leased		□ No
Property:	on oneaseu		☐ Yes
Part 3:	Sign Below		
	nalty of perjury, I declare that I have i that is subject to an unexpired lease.	indicated my intention about any property of my estate that se	cures a debt and any personal
χ /s/ V	Vilfredo Cruz	X /s/ Eva Cruz	
Wilf	redo Cruz	Eva Cruz	
Sign	ature of Debtor 1	Signature of Debtor 2	

Date

Date

November 12, 2016

November 12, 2016

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms. s.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-36119 Doc 1 Filed 11/12/16 Entered 11/12/16 12:00:55 Desc Main Document Page 47 of 54

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

In re	Wilfredo Cruz Eva Cruz		Case No.	
mic	Eva Ciuz	Debtor(s)	Chapter	7
		MODNICA MION OF A MEOD	NEW EOD DE	IDTOD (C)
	DISCLOSURE OF CO	MPENSATION OF ATTOR	NEY FOR DE	CBTOR(S)
C	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. compensation paid to me within one year before be rendered on behalf of the debtor(s) in contem	the filing of the petition in bankruptcy, of	or agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept		\$	2,000.00
	Prior to the filing of this statement I have re	eceived	\$	2,000.00
	Balance Due		\$	0.00
2. 7	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
3. 7	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
4. l	■ I have not agreed to share the above-disclose	ed compensation with any other person u	inless they are mem	pers and associates of my law firm.
I	☐ I have agreed to share the above-disclosed c copy of the agreement, together with a list o			
5.]	In return for the above-disclosed fee, I have agree	eed to render legal service for all aspects	of the bankruptcy c	ase, including:
t c	a. Analysis of the debtor's financial situation, and b. Preparation and filing of any petition, scheduct. Representation of the debtor at the meeting of d. [Other provisions as needed] Negotiations with secured creditor reaffirmation agreements and app 522(f)(2)(A) for avoidance of liens	ales, statement of affairs and plan which a f creditors and confirmation hearing, and ors to reduce to market value; exemplications as needed; preparation a	may be required; I any adjourned hear mption planning;	rings thereof;
6. I	By agreement with the debtor(s), the above-disc Representation of the debtors in any other adversary proceeding.	losed fee does not include the following any dischargeability actions, judic		es, relief from stay actions or
		CERTIFICATION		
	I certify that the foregoing is a complete stateme rankruptcy proceeding.	nt of any agreement or arrangement for p	payment to me for re	epresentation of the debtor(s) in
N	ovember 12, 2016	/s/ Michael W. Hus	seman	
	ate .	Michael W. Husem Signature of Attorney Dreyer, Foote, Stru 1999 West Downer Aurora, IL 60506 630-897-8764 Fax mhuseman@dreye	eit, Furgason & S r Place :: 630-897-1735	locum, P.A.
		Name of law firm	ei ioote.com	

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ADVANCE PAYMENT RETAINER AGREEMENT

735

This contract made this 20 day of 1001 2,016, between the law firm of DREYER, FOOTE, STREIT, FURGASON & SLOCUM, P.A. (herein referred to as the "law firm") and Eva Croz and Wilfrede Croz (herein referred to as the "client").

1. CASE ANALYSIS

Law firm files bankruptcy cases on behalf of individual consumer debtors under Chapter 7 of the bankruptcy code. After law firm's review of client's completed questionnaire and supporting documents, law firm and client will determine whether filing under Chapter 7 is permitted under the bankruptcy code. If filing under Chapter 7 is not permitted, law firm and client will determine which type of other relief is appropriate and/or preferred.

2. TOTAL FEES AND COSTS

a) <u>Fixed Fee:</u> A fixed fee shall be paid by client to law firm for legal services rendered under this contract. The fixed fee shall be paid as follows:

Chapter 7: \$2,000.00

All fees and costs paid or agreed to be paid by client are fully earned compensation to attorney for services rendered and for the responsibility of undertaking representation of client. Client understands that the law firm's acceptance of representation of client means that significant resources will be committed to the case and that other work law firm would otherwise perform will be turned down. Client understands that it is advantageous to treat this retainer as an advance payment retainer to protect the funds paid to the law firm from Client's creditors. All monies paid or agreed to be paid by client are fully earned by law firm and no money is refunded nor may client cancel the obligation regarding the payment of attorney fees and costs. The law firm will have no obligation to provide legal services, until client returns a signed copy of this contract and pays the fixed fee called for under this paragraph.

b) <u>Costs:</u> In addition to the fixed fee, client shall pay a filing fee of \$335.00 for Chapter 7 filing, subject to change as determined by the U.S. Bankruptcy Court and \$23.00 per person for updated credit reports.

3. SCOPE OF DUTIES

Client hires law firm to provide legal services in connection with the preparation of a bankruptcy petition. Law firm shall provide the services listed in Paragraph 4. Law firm shall take reasonable steps to keep client informed of progress and to respond to client's inquiries. Client shall be truthful with law firm, cooperate with law firm, and keep law firm informed of developments, abide by the Contract, pay law firm's bills on time and keep law firm advised of client's address, telephone number and whereabouts.

4. LEGAL SERVICES TO BE PROVIDED

The legal services rendered or to be rendered include:

- (a) Analysis of client's financial situation and rendering advice and assistance to client in determining whether to file a voluntary petition under Title 11, United States Code. (Bankruptcy Code)
- (b) Preparation and filing of the petition, Schedule of Assets and Liabilities, Statement of Affairs, means test forms, supplemental local forms, and Mailing Matrix.
 - (c) Preparation and representation of client at the First Meeting of Creditors.
- (d) Discussion of and recommendation for required pre-petition credit counseling, and education requirements post-petition, and explanation of those requirements under the Bankruptcy Code. Client also acknowledges that they will be solely responsible for the payment of all fees and charges related to the credit and educational counseling.
 - (e) Discussion of options for retaining any secured property.

The legal work includes attendance at the First Meeting of Creditors (by members of the firm OR separate appearance counsel), research, investigation, correspondence, preparation and drafting of pleadings and other legal documents, and related work to properly represent the client in this matter for the items exclusively set forth above.

5. LEGAL SERVICES NOT PROVIDED

The legal services and/or legal representation to be provided by law firm under this agreement DO NOT include:

- (a) representation of client in any adversary proceeding or contested matter instituted by the Trustee, any creditor, or any other interested party;
 - (b) representation of client in any objection to claim of exemptions by trustee or creditor;
- (c) representation of client in any motion for relief from stay by creditor to proceed to foreclose on real property or repossess personal property;
- (d) filing any motions to compel abandonment of assets or motion to avoid judicial liens on real or personal property;
 - (e) objecting to claims filed by any creditor or interested party;
- (f) representation of client in any Rule 2004 discovery proceedings or motions for leave to commence 2004 discovery proceedings, including responding to written discovery requests or attending depositions;
- (g) representation of client for any type of federal or state tax advice, opinion, negotiation, or any other matters pertaining to the discharge of any tax under any state or federal law;
 - (h) attention to any pre-bankruptcy collection activity;

- (i) attendance at any subsequent meeting of creditors after the First Meeting of Creditors or at any hearing regarding reaffirmation agreements;
- (j) representation of client in any audit commenced by the U.S. Trustee's office.

6. CLIENT RESPONSIBILITY

You must fully cooperate with law firm and provide all information relevant to the issues involved in this matter. You must also pay all bills as required by this Agreement. If you do not comply with these requirements, law firm may ask the Court for permission to withdraw from representing you. Law firm will also withdraw at your request.

7. DISCLAIMER OF GUARANTEE

Nothing in this Contract and nothing in law firm's statements to client will be construed as a promise or guarantee about the outcome of the client's matter. Law firm makes no such promises or guarantees. Law firm's comments about the outcome of client's matter are expressions of opinion only. The law firm renders no advice or opinion as to the dischargability of tax debt and has not provided such advice to the client.

8. ADDITIONAL LEGAL SERVICES

If you need other services after the filing date other than routine matters, including, but not limited to, adversary proceedings or contested matters, all services performed by the law firm shall be billed at \$300.00 per hour.

9. ACCURATE INFORMATION REQUIRED

Client acknowledges and understands by signing this agreement that debts will not be discharged if a creditor proves that client lied about assets or concealed, destroyed or transferred any property inconsistent with federal law. Client acknowledges and understands by signing this agreement that all the bankruptcy papers, pleadings and petitions are signed under the penalty of perjury and a false oath, concealment of assets or other allegation under Bankruptcy Code Section 727 by a creditor, trustee or court may result in the denial of discharge of debt or other sanctions, either monetary or non-monetary.

10. AMENDED SCHEDULES

It is important that client provide law firm with complete and accurate information at the beginning of the case. Should there be a need to file an Amended Schedules to include additional creditors and/or assets in the bankruptcy, the client will be required to pay additional legal fees of \$150.00 and, if required, additional court costs of \$30.00, for a total maximum amount due of \$180.00.

11. BANKRUPTCY DISCHARGE

The client acknowledges and understands by signing this agreement that a discharge in bankruptcy is a legal excuse from paying unsecured debts. The client acknowledges and understands by executing this agreement that bankruptcy does not cancel secured debts, debts to creditors that the client did not list on Bankruptcy Schedules, most income taxes, payroll taxes, sales taxes, tax penalties and interest

owed to the State and Federal government, most student loans, child and spousal support, most fraud judgments from any court, punitive damages, criminal restitution and fines, most judgments for malicious and willful conduct from any court, and any money that you owe as a result of being sued for drunken driving.

12. LIQUIDATION OF ASSETS BY TRUSTEE

The client acknowledges and understands that in a Chapter 7 case a trustee will be appointed by the court. The client understands that the Chapter 7 trustee has a duty to investigate the financial affairs of the debtor; determine the available assets to be liquidated for the payment of creditors and oppose the discharge of the debtor, if advisable. The client acknowledges that they have a duty to cooperate with the Chapter 7 trustee. The client acknowledges that the Chapter 7 trustee may investigate the value of their real property, business and any and all other assets that may result in liquidation and payment of money to creditors.

13. TERMINATION OF AGREEMENT FOR INACTIVITY

This agreement is binding for 90 days from its execution. If the client does not pay the total fees and costs pursuant to Paragraph 2, or otherwise fully his or her obligations, the law firm reserves the right to withdraw from representation entirely or require the execution of an updated retainer agreement.

DREYER, FOOTE, STREIT, FURGASON & SLOCUM, P.A.

By /s/ Mike Huseman

Lawyer in Charge MICHAEL W. HUSEMAN 1999 West Downer Place Aurora, IL 60506 (630) 897-8764

United States Bankruptcy Court Northern District of Illinois

re	Wilfredo Cruz Eva Cruz		Case No.	
		Debtor(s)	Chapter 7	
	•	VERIFICATION OF CREDITOR M	ATRIX	
		Number of	Creditors:	1
	The above-named Debtor (our) knowledge.	r(s) hereby verifies that the list of credit	ors is true and correct to	the best of my
te:	November 12, 2016	/s/ Wilfredo Cruz Wilfredo Cruz		
		Signature of Debtor		
te:	November 12, 2016	/s/ Eva Cruz		
		Eva Cruz		
		Signature of Debtor		

Aurora Pediatric Clinic 1300 North Highland Avenue #4 Aurora, IL 60506

Capital Management 698 1/2 South Ogden Buffalo, NY 14206

Chase Card Po Box 15298 Wilmington, DE 19850

Discover Fin Svcs Llc Po Box 15316 Wilmington, DE 19850

Dr. Timothy J. Clare 200 Hillcrest Ave Yorkville, IL 60560

Dreyer Medical Group PO Box 105173 Atlanta, GA 30348

Earthmover Credit Union P O Box 2937 Aurora, IL 60507

Earthmovers Cu Po Box 2937 Aurora, IL 60507

Edward Hospital PO Box 4207 Carol Stream, IL 60197

Jared-galleria Of Jwlr 375 Ghent Rd Akron, OH 44333

Kohls/capone N56 W 17000 Ridgewood Dr Menomonee Falls, WI 53051 Merchants Credit Guide 223 W Jackson Blvd Ste 4 Chicago, IL 60606

Nhhelc/gsm&r Po Box 3420 Concord, NH 03302

Northland Group PO Box 390846 Minneapolis, MN 55439

Thd/cbna Po Box 6497 Sioux Falls, SD 57117

Wells Fargo Hm Mortgag 8480 Stagecoach Cir Frederick, MD 21701